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State of Nebraska
Investigator's Motor Vehicle Accident Report

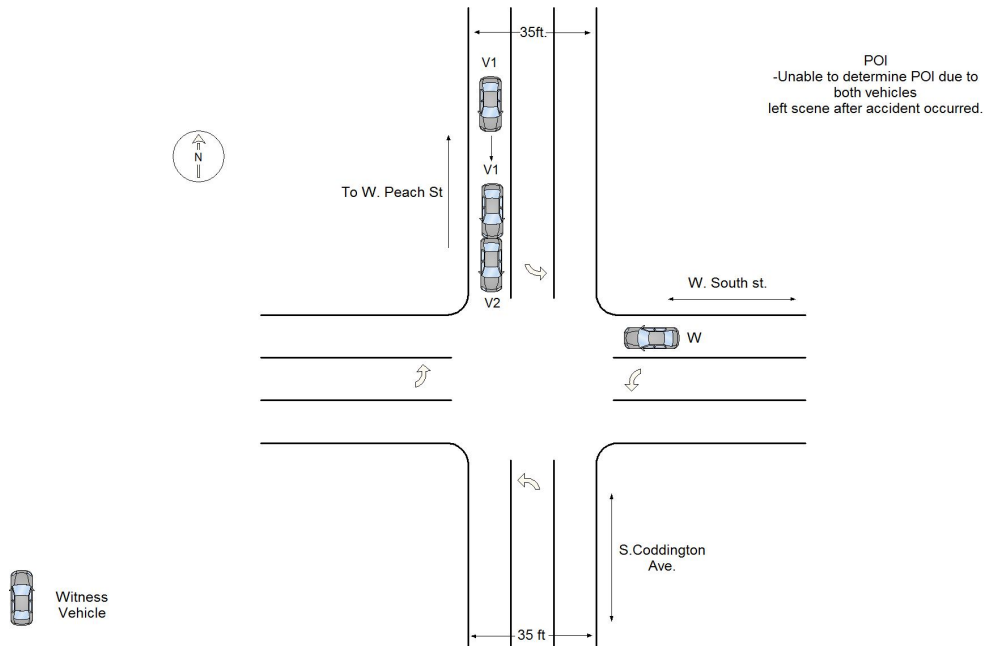
Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 156	Agency Case No. B5-086358	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input type="radio"/> YES <input checked="" type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 09/17/2015		TIME OF ACCIDENT 1548	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1708	09/17/2015	
B	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. S. Coddington Ave./W. South-W. Peach st.		ONE-WAY STREET? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE	
C	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D	IF AT INTERSECTION		IF NOT AT INTERSECTION			
1	NAME OF INTERSECTING ROADWAY		<input checked="" type="radio"/> FEET <input type="radio"/> MILES	N S E W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING	
V1/M	40.00		X	S. Coddington Ave.		
V2/M	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
01	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
2	1					
F	VEHICLE NO. 1					
1	DRIVER LICENSE NO.	H13727087		STATE (Of License)	NE	SEX <input checked="" type="radio"/> FEMALE <input type="radio"/> MALE
V1/N	DRIVER	REGAN L KOLBO		PHONE	(402) 418-1687	
V2/N	DRIVER ADDRESS	CITY, STATE, ZIP		DATE OF BIRTH (MM / DD / YYYY)	04/07/1999	
9	125 BOSWELL AVE, CRETE, NE 68333			PHONE	(402) 641-6599	
G	OWNER	MICHAEL N SMITH / SHAYLENE M SMITH		CITATION	<input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO	CITATION NO.
4	125 BOSWELL AVE, CRETE, NE 68333			YEAR (Plate Expires)	2016	STATE (Of Plate) NE
H	LICENSE PLATE PA NO.	22E985		VEHICLE	2000	MAKE Honda
V1/O	2	YEAR	2000	MODEL	USE	BODY STYLE 4 door Sedan
V2/O	2	VEHICLE ID NO. (VIN)	1HGCG5673YA062932		COLOR	green
I	TOWED TO		TOWED BY		ESTIMATED DAMAGE	<input type="radio"/> TOALED \$ 500
1					INSURANCE COMPANY	American Family Mutual Ins.
V1/P	1		ROGER W MINER		PHONE	(402) 432-0038
V2/P	1		1121 W BURNHAM ST, LINCOLN, NE 68522		DATE OF BIRTH (MM / DD / YYYY)	01/22/1938
J	12		1121 W. Burhnam St., Lincoln, NE 68522		CITATION	<input type="radio"/> PENDING <input checked="" type="radio"/> YES <input type="radio"/> NO
V1/Q	4		SKJ245		YEAR (Plate Expires)	2016
V2/Q	4		1LNHM83W2XY654480		STATE (Of Plate)	NE
K	02				VEHICLE	1999
				MAKE	Lincoln	MODEL CAR
				BODY STYLE	4 door Sedan	COLOR white
				ESTIMATED DAMAGE	<input type="radio"/> TOALED \$ 600	
				INSURANCE COMPANY	USAA General Indemnity	
				POLICY NO.	033877061G	
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						
VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject	3 Body Region
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	4 Injury Sev.	5 Trans.	SEX M F
VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject	3 Body Region
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	4 Injury Sev.	5 Trans.	SEX M F
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	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	4 Injury Sev.	5 Trans.	SEX M F

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B5-086358



Not To Scale

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Driver of vehicle #1 (D1) said she was SB on S. Coddington Ave. and approaching the intersection of S. Coddington Ave. and W. South street at a speed of approx. 5-10 mph. D1 said she went to grab her phone and when she looked forward saw vehicle #2, which was ahead of her in the same lane, had stopped at the light. D1 said she applied her brakes to avoid collision but was unable to stop in time and her vehicle struck vehicle #2 from behind. Driver of vehicle #2 said he was SB on S. Coddington Ave. and stopped at the light of S. Coddington Ave. and W. South street due to the light being red. D2 said while stopped his vehicle was struck from behind by vehicle #1. Witness said she was WB on W. South street and obs. vehicle #1 hit vehicle #2 from behind while vehicle #2 was stopped at the light.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME ANGIE L DUGHMAN	ADDRESS 5239 W. Benton Ave., Lincoln, NE 68524	PHONE (402) 261-8579		
	NAME	ADDRESS	PHONE		

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle)				AIRBAG DEPLOYED VEHICLE 1				RESTRAINT USE VEHICLE 1				TOTAL OCCUPANTS											
VEH NO.	N	S	E	W	VEHICLE 1		VEHICLE 2																				
1		X			S. Coddington /																						
2		X			S. Coddington																						
1	01	06 Turning left			POINT OF IMPACT	01	POINT OF IMPACT	05	1 Deployed - front				1 None used - vehicle occupant				Driver No. 1				1						
2	11	08 Entering traffic lane			MOST DAMAGED AREA	01	MOST DAMAGED AREA	05	2 Deployed - side				2 Lap & shoulder belt used				Driver No. 2				1						
				09 Leaving traffic lane						3 Deployed - both front/side				3 Shoulder belt only used				ALCOHOL LEVEL TESTED				Y	N	X	N	X	N
				10 Parked						4 Not deployed				4 Lap belt only used				BAC LEVEL									
				11 Slowing or stopped in traffic						5 Not applicable/ No airbag available				5 Child safety seat used				ALCOHOL/ DRUGS SUSPECTED				1				1	
				12 Other						6 Unknown				6 Child booster seat used				3 Yes - drugs suspected									
				13 Unknown										7 DOT approved helmet used				4 Yes - alcohol & drugs suspected									
														8 Costume helmet used				5 Unknown									
														9 Restraint use unknown													

OFFICER NO. 1288	TROOP/ TEAM/ BEAT CE	DEPARTMENT Lincoln Police Department	Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type) Chad Baehr		INVESTIGATOR SIGNATURE Approved by Officer Chad Baehr	DATE OF REPORT 09/17/2015